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Bib Data Sheet

CONFIRMATION NO. 8757

SERIAL NUMBER 10/086,753	FILING DATE 03/01/2002 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. ARVI-001
APPLICANTS Ravi Kumar, Briarcliff Manor, NY; ** CONTINUING DATA ***** <i>none</i> ** FOREIGN APPLICATIONS ***** <i>none</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ** ** 03/28/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i>	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
ADDRESS William L. Botjer Po Box 478 Center Moriches ,NY 11934				
TITLE Blood vessel occlusion device				
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			
		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		